

7/11/01

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 19 | 4/19 |
| FORMALITY REVIEW | HA | 924 | 03/01/01 |
| RESPONSE FORMALITY REVIEW | HA | 852 | 10/01/01 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|----------------|-------------------|
| Final Original | 05/03/01 10/11/01 |
| 1 | ✓ |
| 2 | ✓ |
| 3 | ✓ |
| 4 | ✓ |
| 5 | ✓ |
| 6 | ✓ |
| 7 | ✓ |
| 8 | ✓ |
| 9 | ✓ |
| 10 | ✓ |
| 11 | ✓ |
| 12 | ✓ |
| 13 | ✓ |
| 14 | ✓ |
| 15 | ✓ |
| 16 | ✓ |
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| 18 | ✓ |
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| 43 | ✓ |
| 44 | ✓ |
| 45 | ✓ |
| 46 | ✓ |
| 47 | ✓ |
| 48 | ✓ |
| 49 | ✓ |
| 50 | ✓ |

| Claim | Date |
|----------------|-------------------|
| Final Original | 05/03/01 10/11/01 |
| 51 | ✓ |
| 52 | ✓ |
| 53 | ✓ |
| 54 | ✓ |
| 55 | ✓ |
| 56 | ✓ |
| 57 | ✓ |
| 58 | ✓ |
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| 93 | ✓ |
| 94 | ✓ |
| 95 | ✓ |
| 96 | ✓ |
| 97 | ✓ |
| 98 | ✓ |
| 99 | ✓ |
| 100 | ✓ |

| Claim | Date |
|----------------|------|
| Final Original | |
| 101 | |
| 102 | |
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If more than 150 claims or 10 actions
 staple additional sheet here

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